

**SUMMER SWIM PROGRAM
REGISTRATION FORM**
(Please use a separate form for each participant)

Date: _____

Participant Name: _____

Phone Number: _____

Mailing Address: _____

Date of Birth: _____ Any Previous Swim Lessons: _____

If So, Last Level Completed and Year Completed: _____

(Preschool 1-3, Level I, Level 2, Level 3, Level 4, Level 5, Level 6.)

If No Previous Lessons, Does Your Child Have Any Swim Skills, If So, What: _____

Session(s) Registering For (please check) : 1 _____ 2 _____ Both _____

Level Registering For, (If Known) & Days Attending Lessons (M/W or T/Th): _____

Location (please check): ____ Friendship Beach Lake ____ Castle Rock Park Lake ____ Arrowhead Park Lake

Amount Enclosed: \$ _____ Parent/Guardian Signature _____

Cost per Session: \$15.00 per student (ages 4 – Adult) or \$40.00 per family -
Immediate family only, with three or more students registering for lessons for the same session.
(Participant(s) may attend one or both sessions)

American Red Cross Certified Water Safety Instructors/Lifeguards using the standardized American Red Cross Swim Lesson Guidelines teach the lessons. *If you are not sure what level of swimming skill your student(s) are at, all students will be evaluated on the first day of lessons to determine appropriate level placement.* Feel free to ask instructors about the placement and/or progression of your child throughout lessons.

Please make check payable to: Adams County Parks/Recreation Department
Please return this form with session(s) payment and health form by June 15, 2011 to:

Summer Swim Program
Adams County Parks/Recreation Department
Courthouse, 402 Main Street
P.O. Box 196
Friendship, WI 53934

If you have any questions please call the Parks/Rec. Administrative Office at (608) 339-4230.